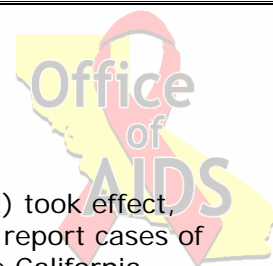


HIV REPORTING UPDATE – JANUARY 2007



Name-based HIV Reporting Emergency Regulations Now in Place

On April 17, 2006, a new California law (Health and Safety [H&S] Code Section 121022) took effect, requiring that health care providers, laboratories, and local health departments (LHDs) report cases of HIV infection using patient names. Under a provision of H&S Code Section 121022, the California Department of Health Services, Office of AIDS (CDHS/OA) must develop emergency regulations to conform Article 3.5 of Chapter 4 of Title 17, California Code of Regulations, Sections 2641.5-2643.20 (HIV reporting regulations) so they are consistent with provisions of the new HIV reporting law. The emergency regulations, which took effect on January 8, 2007, will remain in effect for at least 120 days. Health care providers, laboratories, and LHDs are required to follow the procedures found in the emergency regulations in order to fulfill their HIV reporting mandates in accordance with H&S Code Section 121022. After a public notice is published in the California Regulatory Notice Register, interested parties will have a 45-day opportunity to submit their written comments to CDHS. For a copy of the name-based HIV reporting regulations, visit the HIV Reporting page of the CDHS/OA Web site at www.dhs.ca.gov/AIDS/HIVReporting.

New Requirements in HIV Reporting

The name-based HIV reporting regulations currently in effect permit the reporting of personal information, including patient name, and eliminate the use of the Non-Name Code or Partial Non-Name Code previously used under code-based reporting. Current HIV reporting regulations also codify the authority of LHD staff to provide technical assistance and support to health care providers in the reporting process. The emergency regulations update the Confidential HIV/AIDS Case Report forms for both adult and pediatric cases (DHS 8641A [9/01] and DHS 8641P [9/01], respectively). Health care providers are now required to complete the updated DHS 8641A and DHS 8641P forms when reporting cases of HIV infection to their LHD. Under current regulations, HIV case information may only be transmitted from health care providers or laboratories to LHDs using the following methods: person-to-person data transfers or traceable mail services. These data transmission methods as well as the adoption of a Confidentiality Agreement are intended to protect the confidentiality of HIV-related public health records in the reporting process.

HIV Case Counts¹ as of December 2006

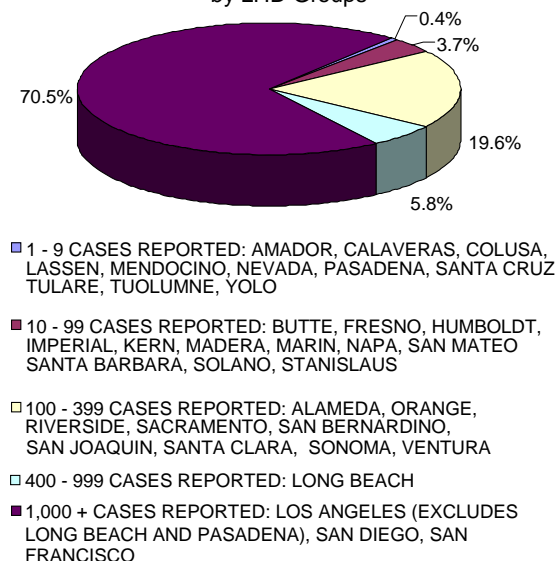
As of December 31, 2006, a total of 7,778 cases of HIV infection have been reported by name. Living HIV cases comprise 98 percent of total HIV case reports submitted to CDHS/OA, or 7,608 cases. During the month of December, an additional seven LHDs began submitting name-based HIV case reports, increasing the total number of reporting jurisdictions to 36.

Cumulative Name-Based HIV Cases Reported per Month, 2006

| Reporting Month | Total Cases | Net Gain |
|-----------------|-------------|----------|
| May | 0 | |
| June | 40 | 40 |
| July | 132 | 92 |
| August | 598 | 466 |
| September | 1,752 | 1,154 |
| October | 2,798 | 1,046 |
| November | 5,527 | 2,729 |
| December | 7,778 | 2,251 |

Source: CDHS/OA, monthly surveillance reports, www.dhs.ca.gov/AIDS/Statistics.

Percent of Total Name-Based HIV Cases Reported by LHD Groups



¹On a monthly basis, OA disseminates summary statistics that describe the extent of California's HIV/AIDS epidemic. These routine surveillance reports are available on OA's Web site at www.dhs.ca.gov/AIDS/Statistics. Beginning in April 2006, the monthly HIV statistics published by OA reflect the number of HIV cases reported by name. For HIV statistics based on cases reported by non-name code, refer to surveillance reports published prior to April 2006, available on OA's Web site.